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## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number 10/650889 01-40101-US

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |                  |                |                              |                                    |                | SMALL ENTITY TYPE |                        |       | OTHER THAN          |          |                   |
|---|--|---|------------------|----------------|------------------------------|------------------------------------|----------------|-------------------|------------------------|-------|---------------------|----------|-------------------|
| TOTAL CLAIMS  |  |   | 45               |                |                              |                                    |                | E                 | FEE                    |       | RATE                | FI       | E                 |
| FOR   |  |   | NUMBER FILED     |                | NUMBER EXTRA                 |                                    | BASIC          | FEE               | 375.00                 | OR    | BASIC FEE           | 750      | 0.00              |
| TOTAL CHARGEABLE CLAIMS   |  |   | 45minus 20=      |                | . 25                         |                                    | X\$ 9          | =                 | 225                    | OR    | X\$18=              | •        |                   |
| INDEPENDENT CLAIMS  |  |   | minus 3 =        |                | . 0                          |                                    | X42            | _                 |                        | OR    | X84=                |          |                   |
| MU  | LTIPLE DEPEN                                   | DENT CLAIM PI                             | RESENT           | ESENT          |                              |                                    |                | )=                |                        | OR    | +280=               |          |                   |
| * If the difference in column 1 is less than zero, enter "0" in column 2              |  |   |                  |                |                              | TOTA                               | AL.            | 600               | OR                     | TOTAL |                     | $\dashv$ |                   |
| 1   | CLAIMS AS AMENDED - PART II                    |   |                  |                |                              |                                    |                |                   |                        |       | OTHER               |          |                   |
| AMENDMENT A   | 15/04  | (Column 1)<br>CLAIMS                      |                  | (Colur         |                              | (Column 3)                         | SMA            | LLE               | NTITY                  | OR    | SMALL               |          |                   |
|   |  | REMAINING<br>AFTER<br>AMENDMENT           |                  | PREVIO<br>PAID | BER<br>OUSLY<br>FOR          | PRESENT<br>EXTRA                   | RAT            | Ε                 | ADDI-<br>TIONAL<br>FEE |       | RATE                | TIC      | DI-<br>NAL<br>EE  |
|   | Total  | · 45                                      | Minus            | ** 4           | 15                           | =                                  | X\$ 9          | =                 | 1                      | OR    | X\$18=              | ı        |                   |
|   | Independent                                    | * /                                       | Minus            | ***            | 3                            |                                    | X42            | =                 |                        | OR    | X84=                |          |                   |
|   | FIRST PRESE                                    | NTATION OF MI                             | ULTIPLE DE       | PENDEN         | CLAIM                        |                                    | +140           | )=                |                        | OR    | +280=               |          |                   |
| TOTAL ADDIT. FEE  |  |   |                  |                |                              |                                    |                |                   |                        | OR    | TOTAL<br>ADDIT, FEE | 1        |                   |
|   |  | (Column 1)                                |                  | (Colui         | mn 2)                        | (Column 3)                         | AUUN. P        | .cc               |                        |       | ADDII. PEEI         |          |                   |
| AMENDMENT B   |  | CLAIMS<br>REMAINING                       |                  | HIGH           | EST                          |                                    |                | П                 | ADDI-                  |       |                     | АГ       | DI-               |
|   |  | AFTER<br>AMENDMENT                        |                  | PREVI          |                              | PRESENT<br>EXTRA                   | RAT            | E                 | TIONAL<br>FEE          |       | RATE                | TIO      | NAL<br>EE         |
|   | Total  | •   | Minus            | **             |                              | 8                                  | X\$ 9          | =                 |                        | OR    | X\$18=              |          |                   |
|   | Independent                                    |   | Minus            | ***            |                              | -                                  | X42            | _                 |                        | OR    | X84=                |          |                   |
|   | FIRST PRESE                                    | NTATION OF MI                             | ULTIPLE DE       | PENDENT        | CLAIM                        |                                    | +140           |                   |                        |       | +280=               | _        |                   |
|   |  |   |                  |                |                              |                                    |                | TAL.              |                        | OR    | TOTAL               | _        |                   |
|   |  |   |                  |                |                              |                                    | ADDIT. F       |                   |                        | OR    | ADDIT. FEE          |          |                   |
| (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST                                       |  |   |                  |                |                              |                                    |                |                   |                        |       |                     |          |                   |
| AMENDMENT C   |  | REMAINING<br>AFTER<br>AMENDMENT           |                  | NUM<br>PREVE   | BER                          | PRESENT<br>EXTRA                   | RATI           | E                 | ADDI-<br>TIONAL<br>FEE |       | RATE                | TIC      | DDI-<br>NAL<br>EE |
|   | Total  | *   | Minus            | **             |                              | =                                  | X\$ 9          | =                 |                        | OR    | X\$18=              |          |                   |
|   | Independent                                    | *   | Minus            | www.           |                              | =                                  | X42:           | _                 |                        |       | X84=                |          |                   |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                  |                |                              |                                    |                |                   |                        | OR    |                     | -        |                   |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |  |   |                  |                |                              |                                    |                |                   |                        | OR    | +280=               |          |                   |
| **  | If the "Highest Nu                             | mber Previously P                         | aid For IN TH    | IS SPACE       | is less tha                  | n 20. enter *20.                   | ADDIT. F       | TAL               |                        | OR    | TOTAL<br>ADDIT. FEE |          |                   |
|   | The "Highest Nun                               | imber Previously P<br>inber Previously Pa | id For" (Total o | or independ    | is less that<br>lent) is the | an 3, enter 3."<br>e highest numbe | er found in th | арр               | ropriate bo            |       |                     |          |                   |